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Bib Data Sheet

CONFIRMATION NO. 4262

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|------------------------------------|---|---------------------|-------------------------------|--|
| <b>SERIAL NUMBER</b><br>10/771,536 | <b>FILING OR 371(c) DATE</b><br>02/05/2004<br><b>RULE</b> | <b>CLASS</b><br>210 | <b>GROUP ART UNIT</b><br>1723 | <b>ATTORNEY DOCKET NO.</b><br>07552.0023 |
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/470,451 05/15/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

ITALY MI2003A000214 02/07/2003

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

05/05/2004

|  |                                   |                            |                           |                                |
|--|-----------------------------------|----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | <b>STATE OR COUNTRY</b><br>FRANCE | <b>SHEETS DRAWING</b><br>9 | <b>TOTAL CLAIMS</b><br>37 | <b>INDEPENDENT CLAIMS</b><br>2 |
| 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                                   |                            |                           |                                |
| Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>  |                                   |                            |                           |                                |

## ADDRESS

22852

## TITLE

Support element for an integrated module for blood treatment, an integrated module for blood treatment, and a manufacturing process for an integrated module for blood treatment

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|------------------------------------|--|---|
| <b>FILING FEE RECEIVED</b><br>4444 | FEES: Authority has been given in Paper.<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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